24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC	
	C C00530766
Check if 24-hour report	on Mam / Dab / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Nebo Media	10 07 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 9625	Amount
City State Zip Code	222000.00
Arlington VA 22219	Transaction ID : SE2147483605 Date of Disbursement or Obligation
Purpose of Expenditure Digital Media Production / Placement Category/ Type	10 06 / 2020
Name of Federal Candidate Support Office	Sought: House District:
TRUMP, DONALD J., , ,	President Senate State:
Calendar Year-To-Date Per Election for Office Sought Disbut 2075981.49	orsement For: Primary X General Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Nebo Media	10 07 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 9625	Amount
City State Zip Code	222000.00
Arlington VA 22219	Transaction ID : SE2147483604 Date of Disbursement or Obligation
Purpose of Expenditure Digital Media Production / Placement Category/ Type	10 06 2020
Name of Federal Candidate Support Office	e Sought: House District:
BIDEN, JOSEPH R JR, , ,	President Senate State:
Calendar Year-To-Date Per Election for Office Sought Disbut 2020	ursement For: Primary X General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	444000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	444000.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
24.0	0 07 2020
Signature	